LB
3411
A8

LB 3411
A8
opy 1

No. 99 Health, Education, Recreation

MEDICAL INSPECTION LEGISLATION

Compiled by
LEONARD P. AYRES, Ph.D.

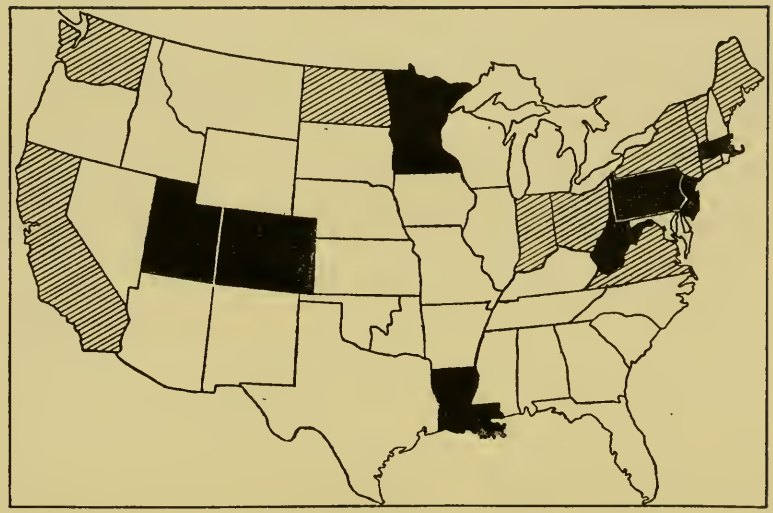
Department of Child Hygiene
Russell Sage Foundation
400 Metropolitan Tower, New York City

Price 20 Cents

5-13-11

SEP 11 1914

LB3411
.A8



MEDICAL INSPECTION LAWS—1911.

States having mandatory laws in solid black, those having permissive laws cross-hatched and those having no laws in outline.

Contents

PAGE

Map 2
Medical Inspection Legislation in America 5
Principal Features of Laws 6
Abstract of Laws and Regulations 7
Provisions New Laws Should Include 11
California 12
Colorado 14
Connecticut 15
District of Columbia 17
Indiana 28
Louisiana 30
Maine 33
Massachusetts 35
Minnesota 40
New Jersey 42
New York 43
North Dakota 44
Ohio 44
Pennsylvania 45
Utah 48
Vermont 49
Virginia 49
Washington 50
West Virginia 50

Medical Inspection Legislation in America

The first state law providing for the medical inspection of school children appears to have been passed by Connecticut in 1899. It did not provide for the complete sort of inspection now carried on in many cities and states, but only for the testing of eyesight by teachers every three years. Complete medical inspection with examinations for the detection of physical defects was first provided for by state enactment in the permissive law of New Jersey passed in 1903. This was followed by the mandatory law of Massachusetts in 1906, which has been several times amended, and which has served as the basis for a majority of the bills which have since been presented in other state legislatures.

At the present time (May, 1911), six states have mandatory laws, ten have permissive ones, and in two states and the District of Columbia medical inspection is carried on under regulations promulgated by the boards of health and having the force of law. The fact that the Massachusetts statute is the oldest of the laws now in force shows that the whole body of legislative enactments which crystallize the views, beliefs and results of experience of educators and physicians, is of distinctly recent origin.

Nevertheless, the past five years have furnished a large body of experience under varying conditions and in widely separated localities, and the lessons of this experience can be read in the substantial agreement of a majority of the laws in several salient features. This is graphically shown by the tabular presentation of the principal features of the different laws and regulations printed on page 6.

On four points there is substantial agreement. The first is that the administration of the provisions of the laws is placed in the hands of the school authorities. The second, third and fourth are respectively placing in the hands of school physicians the inspection for contagious diseases, the physical examinations, and the inspection of teachers, janitors and buildings. In six cases provision is made for testing of vision and hearing by the teachers.

A clear idea of the principal provisions of the different laws may be gained by reading the abstract beginning on page 7.

PRINCIPAL FEATURES OF STATE LAWS AND REGULATIONS PROVIDING FOR MEDICAL INSPECTION—1911

No.	State	Date Adopted	Permissive or Mandatory	Administered by School or Health Authorities	Inspection by Doctors for Contagious Diseases	Physical Examinations by Doctors	Inspection of Teachers, Janitors and Buildings by Doctors	Sight and Hearing Tests by Teachers	Normal Pupils Trained in Tests of Sight and Hearing	Provision for Employment of Nurses	Penalty for Violation of Law	Parents Compelled to Remedy Condition Discovered
1	California	1909	P	S	..	..	..	..	..	..	..	..
2	Colorado	1909	M	S	..	..	..	X	..	..	..	..
3	Connecticut	1907	P	S	X	X	X	..	..	X	..	..
4	District of Columbia	1907	M	H	X	..	X	..	..	..	..	..
5	Indiana	1911	P	S	X	X	X	X	..	..	X	..
6	Louisiana	1911	M	S	..	..	..	..	..	..	..	..
7	Maine	1909	P	S	X	X	X	X	..	..	..	..
8	Massachusetts	1906	M	S or H	X	X	X	X	X	..	..	..
9	Minnesota	1910	M	H	X	X	X	X	X	..	..	..
10	New Jersey	1909	M	S	X	X	..	..	..	..	..	X
11	New York	1910	P	S	..	..	..	..	..	..	..	..
12	North Dakota	1911	P	S	..	X	..	..	..	..	..	..
13	Ohio	1910	P	S	X	..	X	..	..	X	..	..
14	Pennsylvania	1911	M	S	X	X	X	..	..	X	..	..
15	Utah	1911	M	S	..	X	..	X	..	..	..	..
16	Vermont	1910	P	S	X	..	..	..	..	..	..	..
17	Virginia	1910	P	S	..	..	..	..	..	..	..	..
18	Washington	1909	P	S	X	..	X	..	..	..	..	..
19	West Virginia	1911	M	S	X	X	X	..	..	X	..	..

Abstract of Laws and Regulations

1. **California**
   - Adopted 1909—Permissive—Applies where adopted
   - Administered by school authorities
   - Provides for health and development supervision of teachers and pupils
   - Inspectors may be either physicians or educators
2. **Colorado**
   - Adopted 1909—Mandatory—Applies to all public schools
   - Administered by school authorities
   - Teachers or principals test sight, hearing and breathing of all pupils annually
   - School authorities report to parents mental, moral or physical defectiveness discovered
   - Enforcement by State Bureau of Child and Animal Protection
3. **Connecticut**
   - Adopted 1907—Permissive—Applies where adopted
   - Administered by school authorities
   - Physicians inspect children for contagious diseases
   - Physicians may examine teachers, janitors and school premises
   - Physicians conduct sight, hearing and physical examinations annually
   - Defects reported to parents
   - School authorities may appoint school nurses
4. **District of Columbia**
   - Regulations of Health Officer and Board of Education
   - Adopted in present form in 1907—Mandatory—Applies to all public schools
   - Administered by health authorities
   - Physicians examine for contagious diseases
   - Physicians examine sanitary conditions of buildings
   - Physicians may examine teachers and janitors
5. **Indiana**
   - Adopted 1911—Permissive—Applies where adopted
   - Administered by school authorities

Physicians inspect children for contagious diseases
Teachers may test sight and hearing annually
Physicians conduct physical examinations
Defects reported to parents
Not more than 2000 children for one physician
Compensation of physician not less than $5 for each school month
Physicians may examine teachers, janitors and buildings
If parents are too poor to provide necessary medical treatment it shall be paid for from public funds
Penalty of $5 to $50 for violation of provisions of act

6. **Louisiana**

Adopted 1911—Regulations of Sanitary Code of State Board of Health having force of law—Mandatory—Applies to all public schools
Administered by school authorities
Principal of each school makes monthly report on physical condition of children and sanitary condition of buildings on blanks furnished by State Board of Health
Principals and teachers exclude children suffering from contagious disease

7. **Maine**

Adopted 1909—Permissive—Applies to cities and towns of less than 40,000
Administered by school authorities
No more than 1000 pupils to a physician
Physicians inspect children for contagious diseases
Physicians may examine teachers, janitors and buildings
Tests of sight and hearing annually by teachers or physicians
Physical examinations annually by physicians
Defects reported to parents

8. **Massachusetts**

Adopted 1906—amended 1910—Mandatory—Applies to all public schools
Administered by school or health authorities
Physicians inspect children for contagious diseases
Physicians may examine teachers, janitors and buildings
Tests of sight and hearing made by teachers annually
Physicians make physical examinations of children annually
Defects reported to parents
Normal schools train students in testing sight and hearing

Physicians conduct examinations of minors applying for age and schooling certificates

9. **Minnesota**
   Regulations of Board of Health having force of law
   Adopted 1910—Mandatory—Applies to all public schools
   Administered by health authorities
   Physicians examine for contagious diseases
   Physicians may inspect teachers, janitors and buildings
   Physicians conduct physical examinations annually
   Defects reported to parents
   Teachers test sight and hearing annually
   Normal schools train pupils in testing sight and hearing
10. **New Jersey**
   Adopted 1909—Mandatory—Applies to all public schools
   Administered by school authorities
   Physicians examine for contagious diseases
   Physicians conduct physical examinations, including sight and hearing tests
   Defects reported to parents
   Physicians deliver hygiene lectures to teachers
   Parents and guardians may be proceeded against as disorderly persons for failure to remove any pathological condition which may cause a child's exclusion from school
11. **New York**
   Adopted 1910—Permissive
   Authorizes school authorities to expend school funds for the support of medical inspection
12. **North Dakota**
   Adopted 1911—Permissive—Applies where adopted
   Administered by school authorities
   Physicians conduct physical examinations annually
   Defects reported to parents
   Co-operates with Board of Health to curb contagious disease and to secure treatment for indigent children
13. **Ohio**
   Adopted 1910—Permissive—Applies to cities
   Administered by school authorities, but powers may be delegated to health authorities
   Physicians inspect children and schools
   School nurses may be employed

14. **Pennsylvania**
    Adopted 1911—Mandatory in districts of first and second class—Permissive in districts of third and fourth class. Districts of first class are those of more than 500,000 population, second class from 30,000 to 500,000, third class 5,000 to 30,000, and fourth class less than 5,000
    Administered by school authorities
    Physicians conduct complete physical examinations of children annually
    Physicians make sanitary inspection of school premises annually
    In districts of fourth class medical inspectors are appointed by State Commissioner of Health
    Provision for employment of graduate nurses
15. **Utah**
    Adopted 1911—Mandatory—Applies to all public schools
    Administered by school authorities
    Teachers or physicians examine all children annually for defect of sight or hearing, defective teeth or mouth breathing
    Defects reported to parents
16. **Vermont**
    Adopted 1910—Permissive—Applies where adopted
    Administered by school authorities
    Physicians inspect pupils as provided by rules of State Board of Health
    On request, physicians examine pupils of private schools
17. **Virginia**
    Adopted 1910—Permissive—Applies where adopted
    Administered by school authorities
    Authorizes school boards to support systems of medical inspection
18. **Washington**
    Adopted 1909—Permissive—Applies to cities of first class
    Administered by school authorities
    Authorizes school boards to appoint medical inspectors who shall report monthly on health conditions in each school
19. **West Virginia**
    Adopted 1911—Mandatory in cities, permissive in country districts
    Administered by school authorities

Physicians inspect children for contagious diseases
Physicians conduct physical examinations annually
Physicians, on request of board, report on lighting, ventilation, etc.
School nurses may be employed

Provisions New Laws Should Include

A comparative study of the provisions of the different laws shows that with the added experience gained through knowledge of how the older measures have met the test of time, school physicians and educators have incorporated in some of the more recent measures features which are genuine improvements, and which should be provided for in bills for new medical inspection acts and amendments of the old ones. The following are the features which it would seem ought to be included in bills for new medical inspection laws:

1. **A provision that the administration of the system of medical inspection shall be in the hands of the school authorities, but that they shall have the power to delegate their authority to the local health officials, and that in the treatment of cases of contagious diseases the school and health authorities shall co-operate.** The principle here involved is that routine medical inspection and physical examinations are primarily for insuring the health and vitality of the individual child and are preferably handled by the school authorities who are charged with his daily care. The curbing of epidemics of contagious disease is primarily for the protection of the community, and in this the health authorities have the right as well as the duty to intervene. Examples of such provisions as those suggested are to be found in the laws of North Dakota and Ohio.

2. **Provision for inspection by school physicians to detect and exclude cases of contagious disease.**

3. **Provision for annual examinations of all children by school physicians to detect any physical defects which may prevent the children from receiving the full benefit of their school work or which may require that the work be modified to avoid injury to**

them. This provision should include the requirement that parents be notified of any defects discovered.

4. **Provision that annual tests of vision and hearing shall be conducted by the teachers.** This provision was adopted by Massachusetts on the advice of the specialists in these fields and its wisdom has been demonstrated by extensive experience in that state.

5. **Provision that the school physicians may conduct examinations of teachers and janitors and shall make regular inspections of the buildings, premises and drinking water to insure their sanitary condition.**

6. **Provision that pupils in Normal Schools shall receive training in conducting vision and hearing tests.** This requirement is found in the Massachusetts law and the Minnesota regulations.

7. **Provision for the employment of school nurses.** This is provided for in the laws of Connecticut, Ohio, Pennsylvania, and West Virginia.

8. **Provision for the enforcement of the law.** Such provisions, not very well developed, are found in the laws of Colorado, Indiana and New Jersey. The nature of the provision must vary with local conditions. In states where municipalities receive a large part of their school funds from the state, and their school policies are consequently largely controlled through the State Board of Education, it seems clear that the enforcement of the law should be placed in the hands of that body.

California

An Act to Provide for Health and Development Supervision in the Public Schools of the State of California

[Approved April 15, 1909]

The People of the State of California, represented in senate and assembly, do enact as follows:

HEALTH AND DEVELOPMENT SUPERVISION

Section 1. Boards of school trustees and city boards of education are hereby authorized to establish health and development supervision in the public schools of this state, and to employ

an examining staff and other employees necessary to carry on said work and to fix the compensation for the same. Whenever practicable the examining staff for health and development supervision in the public schools of the state shall consist of both educators and physicians.

SEC. 2. The purposes of health and development supervision in the public schools of the state are hereby defined as follows:

1. To secure the correction of developmental and acquired defects of both pupils and teachers which interfere with health, growth and efficiency, by complete physical examination. Said examinations shall occur annually or as often as may be determined by the board of school trustees or city board of education.

2. To adjust school activities to health and growth needs and to development processes and to attend to all matters pertaining to school hygiene.

3. To bring about a special study of mental retardation and deviation of pupils in the public schools.

SEC. 3. The requirements for certification of members of the examining staff for health and development supervision in the public schools of the state shall be as follows:

For educators: A life diploma of California of the high school or grammar school grade and a health and development certificate which shall authorize the holder of such certificate to conduct the work authorized by this act, in those grades specified by the life diploma held.

For physicians: A California certificate to practice medicine and surgery and a health and development certificate.

SEC. 4. County or city and county boards of education are hereby authorized to grant health and development certificates to holders of life diplomas of California of the high school or grammar school grade or to holders of California certificates to practice medicine and surgery who shall present with such life diplomas or with such certificates to practice medicine and surgery a recommendation from the state board of education certifying special fitness for the work specified in this act.

Colorado

An Act Providing for the Examination and Care of Children in the Public Schools, and Making an Appropriation in Connection Therewith

[Enacted 1909]

Be it Enacted by the General Assembly of the State of Colorado:

Section 1. The State Superintendent of Public Instruction shall prepare or cause to be prepared suitable test cards, blanks, record books, and other needful appliances and supplies to be used in testing the sight, hearing and breathing of pupils in the public schools, and the necessary instructions for their use; and shall furnish the same free of expense to every public school in the State. The teacher or principal in every public school, or where there is no principal, the county superintendent, shall, during the first month of each school year, test the sight, hearing and breathing of all pupils under his charge; such examination to be made by observation, without using drugs or instruments, and without coming in contact with said child; and keep a record of such examinations according to the instructions furnished and make a written report of such examinations to the State Superintendent of Public Instruction as he may require.

Sec. 2. Every teacher in the public schools shall report the mental, moral and physical defectiveness of any child under his supervision, as soon as such defectiveness is apparent, to the principal or, where there is no principal, to the county superintendent. Such principal or county superintendent shall promptly notify the parents or guardian of each child found to be defective, of the child's defectiveness, and shall recommend to such parents or guardian that such child be thoroughly examined as soon as possible by a competent physician or surgeon with special reference to the eyes, ears, nose, throat, teeth and spine.

If the parents or guardian of such child shall fail, neglect or refuse to have such examination made and treatment begun within a reasonable time after such notice has been given, the said principal or superintendent shall notify the State Bureau of Child and Animal Protection of the facts; Providing, however, that whenever it shall be made to appear to the said principal or superintendent, upon the written statement of the parent or guardian of said child, that such parent or guardian has not

the necessary funds wherewith to pay the expenses of such examination and treatment, the said principal or superintendent shall cause such examination and treatment to be made by the county physician of the district wherein said child resides; and it shall be the duty of such county physician to make such examination and treatment, and if he be unable to properly treat such child he shall forthwith report such fact to the county commissioners of the county with his recommendation.

SEC. 3. The State Auditor is hereby directed to draw his order for such sums and at such times as the State Superintendent of Public Instruction may require to carry out the provisions of this act. The total expenses under this act shall not exceed one thousand ($1,000.00) dollars in any biennial period ending November 30.

Connecticut

CHAPTER XXI.—HEALTH, SANITATION, AND SAFETY

General Statutes, Chapter 131, page 563
[Enacted 1907]

1907 ch 207 §1 Appointment of school physicians

SEC. 293. The board of school visitors, board of education, or town school committee of any town, or the board of education or committee of any school district, may appoint one or more school physicians and assign one to any public school within the limits of such town or school district, and shall provide such school physicians, when so appointed, with proper facilities for the performance of their duties.

1907 ch 207 §2 Duties

SEC. 294. Every school physician so appointed shall make a prompt examination of all children referred to him as hereinafter provided, and such further examination of teachers, janitors, and school buildings as in his opinion the protection of the health of the pupils may require.

1907 ch 207 §3 Children to be referred to physicians for examination

SEC. 295. The superintendent, principal, or teacher of any school to which a school physician has been assigned as hereinbefore provided shall refer to such physician every child returning to school without a permit from the health officer or board of health, after absence on account of illness or from unknown cause, and every child attending such school who appears to be in ill health, or is suspected to be sick with any contagious or infectious disease, unless such child be immediately excluded

from such school under the provisions of the general statutes or the sanitary regulations in force in said town or district; provided, that in the case of schools in remote and isolated locations the school committee may make such other arrangements as may be advisable to carry out the purposes of this act.

1907 ch 207 §4 Annual examination of children

SEC. 296. The school authorities of any town or school district which has appointed a school physician in accordance with the provisions of this act shall cause every child attending the public schools therein to be separately and carefully tested and examined at least once in every school year to ascertain whether such child is suffering from defective sight or hearing, or from any other physical disability tending to prevent such child from receiving the full benefit of school work, or requiring a modification of such school work in order to prevent injury to the child or to secure the best educational results.

1907 ch 207 §5 Notice of disease to be given to parent or guardian

SEC. 297. Notice of the disease or defects, if any, from which any child is found by such school physician to be suffering shall be given to the parent or guardian of such child with such advice or order relating thereto as said physician may deem advisable, and whenever any child shows symptoms of any contagious or infectious disease notice shall also be given to the health officer or board of health and such child may be excluded from attendance at such school in accordance with the provisions of the general statutes or the sanitary regulations in force in the town or district.

1907 ch 207 §6 Appointment of matron or nurse

SEC. 298. Whenever the board of school visitors, board of education, or town school committee of any town, or the board of education or district committee of any school district, shall have appointed a school physician as provided in Sec. 293, said board or committee may also appoint a matron or nurse who shall take such action, under the direction of the school physician, as may be necessary for safeguarding the health of the pupils and teachers of the schools. Such matron or nurse shall also act, under the direction of the school physician, as a visiting nurse in the town or school district, shall visit the homes of pupils in the public schools, and shall assist in executing the orders of the school physician.

1907 ch 207 §7 Expenses, how paid

SEC. 299. The expenses incurred under the provisions of this act shall be paid in the same manner as are the ordinary expenses for the support of schools in the several towns and school districts.

District of Columbia

Regulations Governing the Medical Inspection of Public Schools

Promulgated in accordance with an Act making appropriations to provide for the expenses of the Government of the District of Columbia, approved March 3, 1903.

Formulated by the Health Officer, June 30, 1903.

Approved by the Board of Education, June 30, 1903.

Approved by the Commissioners of the District of Columbia, July 14, 1903.

Amended by the Health Officer, July 7, 1907.

Approved by the Board of Education, October 9, 1907.

Approved by the Commissioners of the District of Columbia, December 7, 1907.

When pupils shall not attend school.

Section 1. No pupil will be permitted to attend the public schools of the District of Columbia who is suffering from any defect or disease which renders his presence materially detrimental to the welfare or the safety of other pupils, nor will any pupil be permitted to attend school when such attendance will materially jeopardize his own health and the condition out of which such jeopardy arises is of a temporary character.

Teacher shall observe condition of pupils daily.

Sec. 2. Every teacher, immediately after the opening of school each day, will carefully observe the general expression and condition of every pupil and determine whether any of them present appearance suggestive of the advisability of exclusion under the provisions of these regulations.

Teacher shall forward request for examination.

Sec. 3. Every teacher, within one-quarter hour after the opening of school each day, will forward to the principal of the building in which she teaches, a written request on the form provided for that purpose, for the examination by a medical inspector, of each pupil under his care who belongs or appears to belong to any of the following classes:

Classes of cases for examination.

Exclusion of pupils suggested.

Class A. Pupils whose appearances, or known or suggested histories, indicate that they may be suffering from conditions rendering their exclusion from school necessary under the provisions of these regulations.

Pupils returning after exclusion.

Class B. Pupils who have returned after having been excluded from school on the recommendation of the Health Officer, or of a medical inspector, except excluded pupils

who present certificates signed by the Health Officer authrozing their return; but excluded pupils whose return is clearly forbidden by these regulations are not to be referred to the medical inspector for examination, but are to be sent home at once.

Pupils absent for five or more consecutive days.

Class C. Pupils who have been absent from school without cause for five or more consecutive school days, unless the teacher has reason to believe that the absentee has not suffered from or been exposed to a communicable disease.

Emergency examination requested.

Requests for the examination of pupils may, however, be made out and forwarded to the principal for appropriate action, in case of emergency, at any time during the school day.

Pupils to be isolated.

SEC. 4. Any teacher believing that a pupil in his class is suffering from a communicable disease must bring the case to the attention of the principal of the building, and the principal must isolate the pupil, as well as the facilities at his command will permit, pending the arrival of the medical inspector and instruction from him as to the disposal of the case; or if the case be an urgent one, such for instance as a suspected case of smallpox, the principal must submit the facts to the Health Officer at once, by telephone or by messenger, and dispose of the case in such manner as the Health Officer directs.

Suspected cases of smallpox.

When pupils may remain in class room.

SEC. 5. A teacher may, in her discretion, permit a pupil who is not suspected of having a communicable disease to remain in the class room pending the arrival of a medical inspector.

Principal to notify inspector.

SEC. 6. Every principal of a school will notify the medical inspector assigned to such school whenever the services of a medical inspector are required. With respect to the examination of pupils attending all-day classes or morning classes such notification must be given not later than half past nine o'clock, and notification with respect to pupils attending afternoon classes must be given not later than half past one o'clock. If, however, a principal fails to notify the inspector within the allowed time, he must notify him as soon thereafter as possible, and in case of emergency notification may be given at any time.

Notification in case of emergency.

Inspector to respond on day of notice.

SEC. 7. Every medical inspector, upon receiving notice that his services are required at any of the schools to which he has been assigned, will respond to such notice on the day of its receipt and as soon after its receipt as is practicable.

SEC. 8. Every medical inspector will devote to actual inspection work each school day not less than three hours. He will first visit each school from which he has received notice to call and do whatever may be necessary there. If thereafter any part of the required three-hour period remains, the inspector will devote it to the making of routine examinations at schools as hereinafter described.

Inspector to devote not less than three hours each day to inspection.

Order of inspections.

SEC. 9. When a medical inspector calls at a school in response to a request for his services he will immediately procure from the principal the reports made by teachers in compliance with the requirements of Section 4 of these regulations. Then, with the coöperation of the principal, and in his presence or in the presence of a teacher detailed by the principal for that purpose, he will examine all such pupils as are brought to his attention for that purpose. In so doing he will afford the principal and teachers every opportunity to observe the evidence and to learn the reason upon which he bases his recommendation, so that the principal and teachers may be better able thereafter to select from among the pupils under their care those who by reason of defect or disease are unfit to attend school. In the making of such examinations the principal and teachers will assist the inspector in every possible way. All examinations are to be made with the utmost possible privacy and in no case is the examination of an individual pupil, as distinguished from the examination of an entire class, to be made in the class room in the presence of other pupils.

Inspector to secure requests for examination from principal.

Principal to be represented at examination.

Teachers to observe evidence at time of examination.

Teachers to assist in examination.

Examination to be made in private.

SEC. 10. The medical inspector will indorse on the forms which have been made out by the teacher (Form A) his tentative diagnoses and his recommendations. Notes of the subjective and objective symptoms upon which the inspector bases his recommendations for the exclusion of a pupil from school should be made, if the inspector deems it necessary, on the duplicate form, but only such notes should be made in this way as can be made without disclosing information essentially confidential in its nature.

Inspector to indorse tentative diagnoses and recommendations on request.

The "Original" form the inspector will give to the principal of the school for proper action. The "Duplicate" he will preserve and forward to the Health Officer at the close of the day after having made such a memorandum therefrom as may be necessary to enable the inspector to make out his weekly report. The principal will forward the "Original" to the supervising principal as soon as practicable, except in cases of exclusion in

Duplicate request to be sent to Health Officer.

Original request to be sent to supervising principal.

which cases the "Original" should be retained by the principal until after the pupil has been readmitted or his name erased from the school roll.

Teachers to carry out recommendations.

SEC. 11. The teacher of the school in coöperation with the principal will carry out the recommendations of the medical inspector as promptly as possible.

Appeals of principal from decision of inspector.

SEC. 12. Should any principal desire to appeal from the decision of the inspector, he will first carry out the recommendations of such inspector, and after having done so address his appeal, in writing, to the supervising principal of the division to which he is assigned. The supervising principal may undertake to adjust the case by conferring with the Health Officer, either directly or through the superintendent of public schools.

Routine visits of inspector.

SEC. 13. A medical inspector, in determining which of the schools under his supervision shall be visited on any particular day independently of requests for his services, will take into consideration the length of time that has elapsed since each of the various schools under his supervision has been visited, whether on special calls or on routine visits, and will endeavor to arrange his routine visits so that each of the schools assigned to him will receive an equal amount of attention. Routine visits may be made during either the morning or the afternoon sessions of school, as best suits the convenience of the medical inspector, but visits to any one school in which classes are held both in the forenoon and in the afternoon should not be continuously limited either to the morning or afternoon sessions.

Inspector to confer with principal.

SEC. 14. A medical inspector, upon visiting a school for the purpose of making a routine inspection, will confer with the principal and advise him with reference to all such matters of

Inspector to visit classes.

hygiene or sanitation as may be brought to the inspector's attention. At each such visit the inspector, with the principal of the school, or without him, if the principal prefers, will go to one or more of the class rooms and to other parts of the building and observe the physical condition of the pupils and rooms and

Inspector to call attention to sick or defective pupils.

of the building generally. During such inspections the inspector will take occasion to invite the attention of the principal and teachers to such apparently sick or defective pupils as he may observe and to such conditions in the room and in the building generally as require correction, so that appropriate action may be taken and similar conditions avoided in the future.

Inspectors only to act as advisers in medical matters.

Inspectors are cautioned that they are not to act as advisers of principals and teachers, except on matters peculiar to the medical profession, and are not to assume the rôle of critics merely. Under no circumstances should advice be given or remarks made in the presence of pupils, which can be either construed or misconstrued as reflections on the school management. Any apparent dereliction on the part of any janitor should be brought privately to the attention of the principal of the building in which such janitor is employed, so that appropriate action may be had.

Special inspection of all pupils in a class.

SEC. 15. Should occasion require the making of a special inspection of all the pupils in any class or classes, as, for instance, for the purpose of determining whether any of them are or are not suffering from scarlet fever or pediculosis, the inspector will invite the principal to accompany him, and then, either with or without the principal, will proceed to the class or classes to be examined. There the inspector will look over the pupils in a general way, but will make no physical examination of individual pupils in the class room. If, in the course of such examination, it becomes apparent that a closer examination of any pupil is desirable, the teacher will, on the request of the inspector, send such pupil to some proper place in the building where such examination can be made as the inspector deems necessary. For each pupil set aside for special examination the teacher will make out the usual request for examination as provided by Section 3 of these regulations.

Order of special inspection.

Special inspection in case of scarlet fever.

In connection with the examination of the pupils of any class for the purpose of detecting the presence of pupils suffering from scarlet fever, the pupils may be required to raise their hands so as to permit the easier and more rapid examination; but in such cases the inspector must be careful to avoid touching in any way the pupils under examination, at least until after their removal to the examination room, and then if it becomes necessary to touch or handle any pupil, and that pupil is found to have scarlet fever the inspector will carefully disinfect his hands before proceeding to the examination of other pupils.

Teacher to give pupil notice of exclusion in writing.

SEC. 16. The teacher will give to each pupil whom she excludes from school a proper notice, showing the reason for exclusion and the conditions upon which he will be allowed to return. And if a pupil, although not formally excluded in the first instance, is known to be absent because of conditions which, if

When notice of exclusion is to be mailed to parent.

he were in attendance, would justify his exclusion, the teacher will send a like notice to the parent or guardian of such pupil and will give a duplicate thereof to the inspector at the time of his next visit. When an excluded pupil has complied with the conditions necessary to entitle him to readmission to school the teacher will forward the exclusion blank returned by the pupil and containing evidence of such compliance through the principal to the supervising principal.

Readmission after exclusion.

Differences between inspectors and parents, etc., to be referred to Health Officer.

SEC. 17. In event of differences of opinion between a medical inspector and the parent, guardian or family physician of any pupil relative to the necessity for exclusion of the pupil from school, the teacher will refer the parent or guardian to the Health Officer, and if the circumstances in his judgment so require, will report the facts of the case to the supervising principal. Under no circumstances will teachers, principals of schools, medical inspectors or supervising principals, allow themselves to become parties to a controversy in matters of this kind, but all such matters must be settled by conference between the parent or guardian and the Health Officer.

Teachers not to become parties to controversy.

Exclusion for grippe, German measles, communicable diseases of eye, parasitic disease of hair or skin, and other conditions not affecting health of other pupils.

Return after exclusion.

SEC. 18. A pupil who has been excluded from school because of conditions not affecting or liable to affect the health of other pupils, or because of grippe, German measles, communicable disease of the eye, or parasitic disease of the hair or skin, may be permitted to return to school at any time after the expiration of the period specified in the notice of exclusion. He may be permitted to return sooner if he presents a certificate from a lawfully practicing physician showing that in the judgment of such physician he can return with safety to himself and if the pupil has suffered from the grippe, German measles, communicable disease of the eye, or parasitic disease of the skin or hair, that the communicability of the disease has passed. But every such pupil must be reported to the medical inspector for examination on the day of the pupil's return to school. After having reported the case the principal and the teacher will be guided in their future action by whatever recommendation the medical inspector makes.

Pupil to be referred to inspector for examination on day of return.

Return after exclusion for smallpox, scarlet fever, diphtheria, measles, whooping cough, chickenpox and epidemic cerebro-spinal meningitis.

SEC. 19. The return of a pupil to school after he has suffered from or been exposed to smallpox, scarlet fever, diphtheria, measles, whooping cough, chickenpox and epidemic cerebro-spinal meningitis, is regulated primarily by an Act to prevent the spread of contagious diseases in the District of Columbia,

approved March 3, 1897; an Act for the prevention of scarlet fever, diphtheria, measles, whooping cough, chickenpox, epidemic cerebro-spinal meningitis and typhoid fever in the District of Columbia, approved February 9, 1907, and the regulations for the prevention of the diseases just named, promulgated by the Commissioners by authority of the latter act, pertinent extracts from which laws and regulations appear on pages 60 to 62. In order, however, that the health of pupils attending public schools may be further safeguarded no pupil who has suffered from measles will be permitted to return to school until after the expiration of three weeks from the onset of the disease; no pupil suffering from whooping cough until after the expiration of five weeks; no pupil suffering from chickenpox until after the expiration of two weeks, and no pupil suffering from mumps until after the expiration of three weeks.

Period of exclusion for measles.
Period of exclusion for whooping cough.
Period of exclusion for chickenpox.
Period of exclusion for mumps.

A pupil who has suffered from smallpox, scarlet fever, or diphtheria may be permitted to return at any time, but only on the presentation of a certificate issued by the Health Officer authorizing him so to do. No such certificate will be required from pupils who have suffered from measles, whooping cough, chickenpox, mumps, grippe, German measles, communicable disease of the eye and parasitic diseases of the skin and hair, but every such pupil must, on the day of his return, be reported to the medical inspector for examination. Pupils returning after smallpox, scarlet fever and diphtheria, and provided with certificates from the Health Officer, need not be so referred, and if not provided with such certificate they should be sent home immediately. Pupils who are not suffering from mumps but have merely been exposed to that disease need not be excluded from school.

Certificate of Health Officer required in cases of smallpox, scarlet fever and diphtheria.
When no certificate is to be required.

Pupil to be referred to inspector for examination.
When pupil is not to be referred to inspector.

Pupil not to be excluded for exposure to mumps.

SEC. 20. If any pupil be excluded from school because of suspected communicable disease only, the medical inspector will visit such pupil on the day following his exclusion for the purpose of confirming or disproving his tentative diagnosis. If at the time of such visit he finds a physician in attendance on the case, he will retire without examining the patient, unless he is requested by the attending physician to do so.

Inspector to visit pupil after exclusion.

SEC. 21. Whenever a pupil is excluded from school on account of communicable disease, the medical inspector will recommend such disinfection as in his judgment is necessary. Ordinarily the seat and desk of the infected pupil must be washed with a

Inspector to recommend disinfection.

proper disinfecting solution; pen-holders, pencils, etc., which have been in the possession of the pupil must be treated in the same manner if they cannot be destroyed. In some cases it will be necessary to wash the handrails of stairways, doorknobs, etc. Work of this kind must be done by the janitor of the school building. Disinfection of books, when necessary, will be done by employees of the Health Department.

Disinfection to be done by janitors.

Disinfection of books by Health Office.

Disinfection of building.

SEC. 22. Whenever in the judgment of the medical inspector, a school building or part thereof requires disinfection over and beyond that which can be done by the janitor of such building, the medical inspector will so notify the Health Officer at the earliest possible moment. Whether such disinfection shall or shall not be done will be determined by the Health Officer or by the inspector in charge of the contagious disease service after due consideration of all facts in the case. If such disinfection be done, it will be undertaken primarily by employees in the service of the Health Department, but all persons connected with the school building to be disinfected will render such assistance as may be practicable.

Disinfection by Health Office.

Employees to assist in disinfection of building.

Detailed list of school property destroyed to be furnished.

SEC. 23. The Health Officer will furnish the superintendent of public schools with a detailed statement of all school property destroyed because of infection and a certificate showing the necessity for such action.

Closing of a school building.

SEC. 24. If, in the judgment of a medical inspector, any school building or part thereof should be closed he will forthwith make a recommendation to that effect to the Health Officer, who will determine what action should be taken and recommend accordingly. Recommendations of the Health Officer looking toward the closing of any school building or part thereof will be communicated directly to the office of the superintendent of public schools or to his residence, if it be found impracticable to communicate with his office. The superintendent of public schools will thereupon become responsible for all further action looking toward the closing of any such school building or part thereof. Teachers and principals will be governed by such instructions as they receive from the superintendent of public schools.

Superintendent of schools to be notified.

Superintendent of schools to issue instructions.

Inspectors to examine teachers or janitors.

SEC. 25. A medical inspector will, upon the request of the principal of a school building, and with the consent of the teacher or janitor affected, examine any such principal, teacher or janitor, to determine the advisability of such principal, teacher or janitor continuing his school duties. Reports and recommendations in

cases of teachers and janitors will be addressed to the principal of the school building, and in the case of principals will be addressed to the proper supervising principal. All such reports, however, will be delivered by the medical inspector to the principal of the school building.

Exclusion of teachers and janitors.

SEC. 26. This exclusion of teachers and janitors from schools and the resumption by them of their school duties will be determined in accordance with these regulations so far as they may be applicable.

Emergency cases to be immediately reported.

SEC. 27. In the event of the occurrence of any emergency requiring medical aid, the principal of the building will call at once upon the medical inspector assigned to such building. If unable to secure his services with reasonable promptness, he will communicate with the Health Department, which will arrange for the services of another inspector, or, in some other manner supply the needed assistance.

Inspector to respond promptly to emergency calls.

SEC. 28. Medical inspectors will respond promptly to all calls coming from any of the school buildings under their care, or from the Health Department, for aid in any case of emergency requiring medical care.

Special examination at request of Board of Education.

SEC. 29. Examination of applicants for admission to the normal school, of pupils in that school seeking graduation, and of applicants for appointment as teachers or janitors, to determine their physical fitness for admission, graduation or appointment, will be made when requested by the Board of Education by a medical inspector or medical inspectors of schools detailed for that purpose by the Health Officer.

Inspectors to note and report unsanitary conditions.

SEC. 30. Medical inspectors will note such unsanitary conditions in and about school buildings as may be called to their attention or as may come under their personal observation, and will report them to the Health Officer. The Health Officer, if such conditions arise from property under the control of the Board of Education, will report them to that board, and to the Engineer Department. Inspectors will bear in mind that they are not to act as mere agents for the transmission of complaints of the cause of which they have no personal knowledge.

Inspectors to mail duplicate forms to Health Officer.

SEC. 31. Each day, as soon as possible after leaving the last school to be visited, inspectors will mail to the Health Officer the duplicate slips showing tentative diagnoses and recommendations which they have made during the day (Form A, Duplicate). Before doing so, however, they will note for use in the preparation

of their weekly report (Form D) such data as may be necessary for that purpose.

Employees held accountable for disclosure of information.

SEC. 32. Every officer and agent of the Health Department and of the Board of Education will be held strictly accountable for any unwarrantable disclosure of information acquired in his official capacity. A medical inspector of public schools does not lose his character as a physician by reason of his office and therefore must not disclose any information which is essentially confidential in its character and which he has acquired in his official capacity, except to those properly entitled to receive it. No such information should ever be embodied in routine reports, but if a report is necessary it should be specially and confidentially submitted.

Inspectors to perform such additional duties as directed by Health Officer.

SEC. 33. Medical inspectors will be required to perform such duties in connection with the medical inspection of public schools, in addition to those specifically described in these regulations, as may be directed by the Health Officer. No physical examination of the pupils of any entire room or building is to be undertaken except so far as may be necessary for the detection of communicable diseases and of defects of sight and hearing, without the consent of the Board of Education.

Inspector to report to Health Officer in case of illness.

SEC. 34. If by reason of illness or any other cause the medical inspector is unable to report at schools under his supervision in his usual manner, he will communicate at once with the Health Officer, so that proper arrangements can be made for the performance of his work. A written explanation of such absence must in each case be forwarded to the Health Officer as soon as practicable.

Inspectors to report to Health Officer when directed.

SEC. 35. Medical inspectors will report at the Health Office from time to time as may be directed by the Health Officer. Special meetings of medical inspectors of schools may be called at other places in the discretion of the Health Officer.

Jurisdiction of inspectors.

SEC. 36. The jurisdiction of the medical inspector of schools is limited and defined by these regulations. Visits to pupils at their homes or examinations of pupils there may be made only as these regulations authorize, and then only with the consent of their parents or guardians, and if any such pupil be under the care of a physician, the consent of such physician also must be obtained.

Inspectors not to treat excluded pupils.

SEC. 37. Under no circumstances will a medical inspector undertake to treat a pupil, teacher or janitor, who has been

excluded from school on his recommendation during the period of such exclusion, unless such pupil, teacher or janitor, or the family of such pupil, teacher or janitor, has been under the professional care of such inspector prior to the occurrence of the condition which led to exclusion: *provided, however*, that any circular or circulars relative to the treatment of pediculosis, ringworm, or any similar condition which the Health Officer may furnish may be given to pupils excluded from school because suffering from such disease. Any effort to make the office of medical inspectors of schools a means for increasing private practice will lead to the prompt dismissal of the offender.

When circulars may be given pupils.

SEC. 38. Every principal of a school will see that there are at all times on hand in the building under his supervision a sufficient supply of blanks of all kinds, tongue depressors, disinfectants and proper receptacles for the disinfecting solutions, and soap, towels, and a nail brush for the use of the inspector. These articles can be obtained by applying to the secretary of the Board of Education.

Principals to see to medical supplies.

Medical inspectors will obtain such articles as are needed solely for their use in the keeping of their records and the making of their reports by application to the Health Officer. Articles needed for use in connection with the actual examination of pupils and for the making out of recommendations, etc., at school buildings, will be supplied in all cases by the principals of such buildings.

Inspectors to obtain blanks, etc., from Health Officer.

SEC. 30. The word "he" and the derivatives thereof wherever used in these regulations are to be read to include the word "she" and its corresponding derivatives, respectively, and any power and authority conferred upon a principal or teacher in and by these regulations may be exercised by any officer in the service of the Board of Education, having a higher rank, and any power and authority conferred upon a medical inspector may be exercised by any officer in the service of the Health Department with relatively higher standing.

Use of derivatives.

Indiana

An Act to Protect and Conserve the Health and Lives of School Children and Promote Their Efficiency by Providing for Their Medical Inspection and Subsequent Necessary Treatment

[Enacted 1911]

Section 1. Be it enacted by the General Assembly of the State of Indiana, That all school trustees and township trustees are herewith permitted and recommended to institute medical inspection of school children at any time; the said trustees *may* require teachers to annually test the sight and hearing of all school children under their charge, the said tests and uses thereof to be made according to the rules hereinafter authorized.

Sec. 2. The term, medical inspection, as used in this act, shall be held to mean—the testing of the sight and hearing of school children and the inspection of said children by school physicians for diseases, disabilities, decayed teeth or other defects, which may reduce efficiency or tend to prevent their receiving the full benefits of school work.

Sec. 3. Beginning with the school year 1911, school trustees and township trustees may appoint at least one school physician for each school corporation: Provided, Where practicable, two or more school corporations may unite and employ one such physician, whose duties shall be such as are prescribed in this act and the authorized rules, but not more than 2,000 children shall have a school physician. Said school physicians shall be graduates of a medical college, recognized by the state board of registration and examination, shall hold a license to practice medicine in Indiana, and shall be informed and skilled in medical inspection of children, informed in the health laws and the health rules of the state board of health, shall be temperate, able-bodied, cleanly in person, not addicted to drugs, and of good moral character, and no others shall be appointed. School physicians may be discharged by the appointing power at any time for written cause. School physicians shall serve one year and until their successors are appointed, and shall receive such compensation as the appointing trustee or trustees may determine: Provided, The compensation shall be not less than $5.00 for each school month in the year.

SEC. 4. School physicians shall make prompt examination and diagnosis of all children referred to them and such further examination of teachers, janitors and school buildings as in their opinion the protection of the health of the pupils and teachers may require. Whenever a school child is found to be ill or suffering from any physical defect, the school physician shall promptly send it home, with a note to parents or guardians, briefly setting forth the discovered facts, and advising that the family physician be consulted. If the parents or guardians are so poor as to be unable to give the relief that is necessary, then school trustees and township trustees, as the case may be, shall provide the necessary relief: Provided, That in cities where public dispensaries exist, the relief shall be given by said dispensaries.

School physicians shall keep accurate card-index records of all examinations, and said records, that they may be uniform throughout the state, shall be according to the form prescribed by the rules authorized in this act, and the method and manner of reports to be made shall be according to said rules.

SEC. 5. The State board of education and the state board of health shall jointly pass rules for the detail enforcement of the purposes of this act, which rules shall bear the printed seals of said boards; the said rules to be printed and promulgated by the state printing board; promulgation to consist in supplying a reasonable number of copies to each county superintendent from whom all who are interested may procure a copy. Any violation of said rules shall be punished by a fine of not less than five nor more than twenty-five dollars.

SEC. 6. All violations of this act, except as otherwise provided, shall be punished by a fine of not less than ten nor more than fifty dollars.

SEC. 7. All acts in conflict with this act are repealed.

Louisiana

Sanitary Regulations of the Louisiana State Board of Health, Concerning Hygiene and Sanitation of Schools

[Adopted 1911]

SANITARY CODE, STATE OF LOUISIANA, SECTION 250—

(a) The parish or municipal school board, and parish superintendent of schools, shall be held responsible for the execution and enforcement of the following rules and regulations, and all other health laws governing the hygiene of the schoolroom and the premises of the schools under their respective jurisdictions.

(b) Plans and specifications for every schoolhouse hereafter erected in the State must be submitted to the parish superintendent of schools, and to the State Superintendent of Education, and also to the parish health officer, that it may be determined whether every hygienic or necessary provision is made, especially with reference to ventilation, light and protection against fire.

(c) Every schoolhouse, public or private, or other building used for school purposes, shall be ventilated in such manner as to afford eighteen hundred cubic feet of air per hour for each adult, and a proportionate amount for each child, and shall contain not less than two hundred cubic feet of air space for each child to be taught therein. Windows and transoms shall be so constructed that windows may be lowered from the top and transoms opened. Every schoolhouse must be lighted in such a manner as to minimize the eye strain. Each room must contain of actual surface of glass in the windows not less than one-seventh of the floor space.

(d) All doors except those which slide into wall pockets shall open outward, and all partition doors shall be hung on double-action hinges.

(e) The floors of every school must be treated with some antiseptic floor dressing. Applications to be at sufficiently frequent intervals to keep down effectually the dust; floors to be scrubbed thoroughly before each application. Floor dressings for use in the schools must be approved by the State analyst.

The floors of every school must be swept daily, sweeping to be done after all pupils have left the building. All windows

must be thrown open and schoolhouse thoroughly aired after cleaning.

All desks, wainscoting, window sills and baseboards in every schoolhouse in the State must be wiped off daily with a cloth moistened with 1–2000 bichloride of mercury, or 3 per cent. carbolic acid solution.

(f) Spitting on the floors, walls, etc., must be strictly prohibited and anti-spitting placards placed in every room.

(g) No person suffering from any communicable disease shall be employed as teacher or janitor in any public school in this State. At the opening of each annual term teachers must furnish a health certificate from a registered physician, addressed to the parish superintendent of schools, certifying that they are not suffering from tuberculosis or other communicable disease.

No one shall be entered as a pupil in the public schools of this State without first having presented to the principal in charge a certificate from a registered physician of Louisiana, certifying that within the preceding five years the applicant was successfully vaccinated.

Three unsuccessful attempts at vaccination with a proven virus shall be accepted as an immunity for a period of one year.

Pupils are required, at the end of each five years, to renew their vaccination certificates.

(h) No pupil suffering from any communicable disease shall be permitted to attend the public schools of this State. The principal or the teacher has the right to exclude any child from the schools whom they suspect of suffering from any communicable disease, pending examination and report of a registered physician.

(i) All schoolrooms in the State must be disinfected before the beginning of each school session, with the formaldehyde-permanganate of potash mixture as indicated in the bulletin of disinfection.

(j) On the appearance in a school of any communicable disease, either among the pupils, teachers or attendants, the school shall be closed immediately and fumigated before re-opening.

(k) The school premises shall be thoroughly drained and no stagnant water permitted to collect. In towns with a drainage system, or where an outflow is possible, the school site and the entire area of the ground shall be properly drained, so as to reduce the ground water level, and the drainage effected in such

manner as not to contaminate with its effluvia any well, cistern or other source of drinking water.

(l) Every school must be supplied with an abundance of pure drinking water for drinking purposes. Where water is used from surface wells, said wells must be located at least 100 feet from any closet.

(m) The use of open receptacles for drinking water in schools, and also of dippers or cups for common drinking purposes, is prohibited. The school authorities must supply for holding drinking water covered containers with faucets, which containers must be scoured daily when in use. All teachers and pupils must provide themselves with individual drinking cups or glasses. In towns or cities where there is a public water supply a sanitary drinking fountain shall be installed.

(n) Every school in this State must have a sufficient number of trash or garbage cans for the convenience of the pupils, teachers and employees, and said trash or garbage cans must be kept closed, and emptied daily.

(o) The urinals and water closets must be connected with the sewerage system, where one exists, when within 1000 feet therefrom. Where no sewerage system exists, all schools must have a Stiles sanitary closet (plans and specifications will be furnished by the State Board of Health upon request), cesspool or septic tank. Where the Stiles sanitary closet is used the inner surface of the container must be treated with crude petroleum at least once a week. All closets must be scrubbed once a week and kept in a sanitary condition at all times.

(p) The State Board of Health will, when desired by the State institutions of learning, or the State Pedagogical Institutes, or the Agricultural Institutes, send a lecturer to deliver a series of lectures on:

1. Personal hygiene.
2. School hygiene.
3. Principles and practice of physical training.
4. Drug and alcohol addictions.
5. Contagious and infectious diseases; cause and prevention.
6. Hygiene of the home and farm.

(q) The principal of each school in the State, except in cities where there is employed a regular medical inspector, shall make a monthly report to the parish superintendent of schools on the sanitary condition of the school building and surroundings, also

the physical condition of the school children. Blank reports for this purpose will be furnished by the Louisiana State Board of Health. Parish superintendents of schools shall forward these reports to the Louisiana State Board of Health within ten days after their receipt by him.

Maine

An Act Relative to the Appointment of School Physicians

(Chap. 73, P. L. 1909)

[Approved March 16, 1909]

School physicians, appointment of.

Section 1. The school committee of every city and town shall appoint one or more school physicians and shall assign one to the medical inspection of not over one thousand pupils of the public schools within its city or town, and shall provide them with all proper facilities for the performance of their duties as prescribed in this act, provided, however, the said committee has been so authorized by vote of town at regular town meeting or at a special town meeting called for that purpose.

Duties of physician.

Sec. 2. Every school physician shall make a prompt examination and diagnosis of all children referred to him as hereinafter provided, and such further examination of teachers, janitors and school buildings as in his opinion the protection of the health of the pupils may require.

Pupils, by whom treated.

Sec. 3. The pupils so examined by school physicians when treatment is necessary shall not be referred to the school physicians for such treatment except the school physician be the regular family physician of such pupil, but shall be referred to the regular family physician of such pupil through the parents or guardian.

Examination of pupils after absence on account of sickness.

Sec. 4. The school committee shall cause to be referred to a school physician for examination and diagnosis every child returning to a school without a certificate from the board of health or family physician after absence on account of illness or from unknown cause; and every child in the schools under its jurisdiction who shows signs of being in ill health or of suffering from infectious or contagious diseases, unless he is at once excluded from school by the teacher; except that in case of —exception

schools in remote and isolated situations, the school committee may make such other arrangements as may best carry out the purposes of this act.

Notice of disease or defects.

SEC. 5. The school committee shall cause notice of disease or defects, if any, from which any child is found to be suffering to be sent home to his parents or guardian. Whenever a child shows symptoms of smallpox, scarlet fever, measles, chicken pox, tuberculosis, diphtheria or influenza, tonsilitis, whooping cough, mumps, scabies or trachoma, he shall be sent home immediately or as soon as safe and proper conveyance can be found, and the board of health and superintendent of schools shall at once be notified.

Examination of sight and hearing.

SEC. 6. The school committee of every city or town shall cause every child in the public schools to be separately and carefully tested and examined at least once in every school year to ascertain whether he is suffering from defective sight or hearing or from any other disability or defect tending to prevent his receiving the full benefit of his school work, or requiring a modification of the school work in order to prevent injury to the child or to secure the best educational results. Tests of sight and hearing shall be made by the teachers or by the school physicians. The committee shall cause notice of any defect or disability requiring treatment to be sent to the parent or guardian of the child, and shall require a physical record of each child to be kept in such form as the state superintendent of public schools shall prescribe after consultation with the state board of health.

—notice to parent or guardian.

State superintendent of schools shall prescribe directions for tests of sight and hearing.

—amount to be expended.

SEC. 7. The state superintendent of public schools shall prescribe after consultation with the state board of health the directions for tests of sight and hearing, and shall prescribe and furnish to the school committees suitable rules of instruction, test cards, blanks, record books and other useful appliances for carrying out the purposes of this act. The state superintendent of public schools may expend during the year nineteen hundred and nine a sum not greater than five hundred dollars for the purpose of supplying the material required for this act.

Expense that may be incurred by city or town.

SEC. 8. Expenses which a city or town may incur by virtue of the authority herein vested in the school committee shall not exceed the amount appropriated for that purpose in cities by the city council and in towns by a town meeting. The appropriation shall precede any expenditure of any indebtedness

which may be incurred under this act and the sum appropriated shall be deemed sufficient appropriation in the municipality where it is made. Such appropriation need not specify to what section of the act it shall apply and may be voted as a total appropriation to be applied in carrying out the purposes of this act.

SEC. 9. The provision of this act shall apply only to cities and towns having a population of less than forty thousand inhabitants.

Applies to cities and towns having less than forty thousand inhabitants.

Massachusetts

(Chapter 502, Acts of 1906)

APPOINTMENT OF SCHOOL PHYSICIANS, ETC.

SECTION 1. (*As amended by chapter 257, Acts of 1910.*) The school committee of every city and town in the Commonwealth shall appoint one or more school physicians, shall assign one to each public school within its city or town, and shall provide them with all proper facilities for the performance of their duties as prescribed in this act; *and shall assign one or more to perform the duty of examining children who apply for health certificates in accordance with this act: provided, however,* that in cities wherein the board of health is already maintaining or shall hereafter maintain substantially such medical inspection as this act requires, the board of health shall appoint and assign the school physician.

EXAMINATION AND DIAGNOSIS TO BE MADE

SEC. 2. (*As amended by chapter 257, Acts of 1910.*) Every school physician shall make a prompt examination and diagnosis of all children referred to him as hereinafter provided, and such further examination of teachers, janitors and school buildings as in his opinion the protection of the health of the pupils may require. *Every school physician who is assigned to perform the duty of examining children who apply for health certificates shall make a prompt examination of every child who wishes to obtain an age and schooling certificate, as provided in section sixty of chapter five hundred and fourteen of the acts of the year nineteen hundred and nine, and who presents to said physician an employ-*

ment ticket, as provided in said section, *and the physician shall certify in writing whether or not in his opinion such child is in sufficiently sound health and physically able to perform the work which the child intends to do.*

AUTHORITY OF SCHOOL COMMITTEES, ETC.

SEC. 3. The school committee shall cause to be referred to a school physician for examination and diagnosis every child returning to school without a certificate from the board of health after absence on account of illness or from unknown cause; and every child in the schools under its jurisdiction who shows signs of being in ill health or of suffering from infectious or contagious disease, unless he is at once excluded from school by the teacher; except that in the case of schools in remote and isolated situations the school committee may make such other arrangements as may best carry out the purposes of this act.

NOTICE TO BE SENT TO PARENT OR GUARDIAN

SEC. 4. The school committee shall cause notice of the disease or defects, if any, from which any child is found to be suffering to be sent to his parents or guardian. Whenever a child shows symptoms of smallpox, scarlet fever, measles, chickenpox, tuberculosis, diphtheria or influenza, tonsilitis, whooping cough, mumps, scabies or trachoma, he shall be sent home immediately, or as soon as safe and proper conveyance can be found, and the board of health shall at once be notified.

TESTS OF SIGHT AND HEARING, AND EXAMINATION FOR DISABILITY OR DEFECTS

SEC. 5. The school committee of every city and town shall cause every child in the public schools to be separately and carefully tested and examined at least once in every school year to ascertain whether he is suffering from defective sight or hearing or from any other disability or defect tending to prevent his receiving the full benefit of his school work, or requiring a modification of the school work in order to prevent injury to the child or to secure the best educational results. The tests of sight and hearing shall be made by teachers. The committee shall cause notice of any defect or disability requiring treatment to be sent to the parents or guardian of the child, and shall require a physical record of each child to be kept in such form as the state board of education shall prescribe.

STATE BOARD OF HEALTH TO PRESCRIBE DIRECTIONS; STATE BOARD OF EDUCATION TO FURNISH RULES, ETC.

SEC. 6. The state board of health shall prescribe the directions for tests of sight and hearing and the state board of education shall, after consultation with the state board of health, prescribe and furnish to school committees suitable rules of instruction, test-cards, blanks, record books and other useful appliances for carrying out the purposes of this act, and shall provide for pupils in the normal schools instruction and practice in the best methods of testing the sight and hearing of children. The state board of education may expend during the year nineteen hundred and six a sum not greater than fifteen hundred dollars, and annually thereafter a sum not greater than five hundred dollars* for the purpose of supplying the material required by this act.

CHAPTER 257, ACTS OF 1910

Sections 1 and 2 of chapter 257 amend sections 1 and 2 of chapter 502, Acts of 1906, as given above.

Section 3 of chapter 257 amends section 58 of chapter 514, Acts of 1909, as given below.

An age and schooling certificate shall be approved only by the superintendent of schools or by a person authorized by him in writing, or, if there is no superintendent of schools, by a person authorized by the school committee; but no member of a school committee or other person authorized as aforesaid shall approve such certificate for any minor then in or about to enter his own employment or the employment of a firm or corporation of which he is a member, officer or employee. No such certificate shall be approved by any person unless he is satisfied that the minor therein named is able to read at sight and to write legibly simple sentences in the English language, *nor until such person has received a certificate signed by a physician, as provided in chapter five hundred and two of the acts of the year nineteen hundred and six and acts passed in amendment thereof, or by a physician appointed by the school committee, stating that said minor has been examined by him and in his opinion is in sufficiently sound health and physically able to perform the work which the minor intends to do; provided, however, that the age and schooling certificate may be approved and issued without a physician's certificate if there shall be on file in connection with the public schools a written record*

* Eight hundred dollars now appropriated under chapter 189, Acts of 1908.

in regard to the child's physical condition made within one year and the person authorized to approve said age and schooling certificate after having examined such record shall certify that in his opinion said minor is in sufficiently sound health and physically able to perform the work which the minor intends to do. The person who approves the certificate may administer the oath provided for therein, but no fee shall be charged therefor.

Section 4 of chapter 257, Acts of 1910, amends, as given below, section 60, Acts of 1909.

EMPLOYMENT TICKET AND AGE AND SCHOOLING CERTIFICATE

The age and schooling certificate of a minor under sixteen years of age shall not be approved and signed until he presents to the person who is authorized to approve and sign it an employment ticket duly filled out and signed. A duplicate of each age and schooling certificate shall be filled out and shall be kept on file by the school committee. Any explanatory matter may, in the discretion of the school committee or superintendent of schools, be printed with such certificate. The employment ticket and the age and schooling certificate shall be separately printed and shall be filled out, signed and held or surrendered as indicated in the following forms:—

EMPLOYMENT TICKET, ST. 1909, C. 514, §60

When [name of minor] , height [feet and inches] , complexion [fair or dark] , hair [color] presents an age and schooling certificate duly signed, I intend to employ [him or her].

(Signature of intending employer or agent.) (Town or city and date.)

AGE AND SCHOOLING CERTIFICATE, ST. 1909, C. 514, §60, AS AMENDED BY ST. 1910, C. 257, §4

This certifies that I am the [father, mother, guardian or custodian] of [name of minor], and that [he or she] was born at [name of city or town], in the county of [name of county, if known], and state [or country] of , on the [day and year of birth], and is now [number of years and months] old.

[Signature of father, mother, guardian or custodian.]

[City or town and date.]

Then personally appeared before me the above-named [name

of person signing], and made oath that the foregoing certificate by [him or her] signed is true to the best of [his or her] knowledge and belief. I hereby approve the foregoing certificate of [name of minor], height [feet and inches], complexion [fair or dark], hair [color], having no sufficient reason to doubt that [he or she] is of the age herein certified. I hereby certify and am satisfied that [he or she] can read at sight and can write legibly simple sentences in the English language. I further certify that in my opinion [or in the opinion of , the physician by whom said minor has been *examined in accordance with section fifty-eight of the above chapter*] *he* [*or she*] *is in sufficiently sound health and physically able to perform the work which he* [*or she*] *intends to do.*

This certificate belongs to [name of minor in whose behalf it is drawn], and is to be surrendered to [him or her] whenever [he or she] leaves the service of the corporation or employer holding the same; but if not claimed by said minor within thirty days after such time, it shall be returned to the superintendent of schools, or, if there is no superintendent of schools, to the school committee.

[Signature of person authorized to approve and sign, with official character or authority.]

[City or town and date.]

In the case of a minor who cannot read at sight and write legibly simple sentences in the English language, the certificate shall continue as follows, after the word "language":—

I hereby certify that [he or she] is regularly attending the [name] public evening school. This certificate shall continue in force only so long as the regular attendance of said minor at the evening school is endorsed weekly by a teacher thereof.

This act shall take effect on the first day of August in the year nineteen hundred and ten.

Minnesota

Regulations of the Minnesota State Board of Health

[Adopted June 15, 1910]

PROTECTING THE HEALTH OF SCHOOL CHILDREN

71. The local board of health of every city, village and township in Minnesota shall appoint one or more school physicians, shall assign a school physician to every school within the city, village or township, shall provide him with all necessary blanks and proper facilities for the performance of his duties and shall require him to call at such intervals as may be prescribed by the local board of health, or whenever notified so to do by the head of the school, at the school building or buildings under his jurisdiction; except that, in the case of schools in remote and isolated situations, the local board of health may, after consultation with the State Board of Health, make such other arrangement as may best carry out the purpose of this regulation.

72. Each school physician shall make a medical examination of all school children referred to him for that purpose, and such examination of pupils, teachers and janitors, and of school buildings as in his opinion the protection of the health of the public may require, and shall report the results of such examinations to the State Board of Health.

73. The local board of health of every city and village shall require every teacher to report each morning to the head of the school the case of every child belonging to his or her room who shows signs of being in ill health or suffering from a communicable disease; also every child returning to school after absence on account of illness of unknown cause. The head of the school, upon receiving such report, shall as soon as possible thereafter notify the school physician and refer to him all such cases for examination. Whenever, in the opinion of the head of the school, a child's condition requires that he or she be sent home, and whenever a child shows symptoms of smallpox, scarlet fever, diphtheria, measles, chicken pox, tuberculosis, influenza, tonsilitis, erysipelas, whooping cough, mumps, itch, ringworm or trachoma, he or she shall send such suspect home immediately, or as soon as a safe and proper conveyance can be found, and the local health officer shall be notified at once by the head of the school of such case.

74. In the event of any school child having smallpox, or having been exposed to the disease while in attendance at school, the building where such child is in attendance shall be closed by the order of the local health officer and kept closed until the place has been thoroughly disinfected and cleansed under the supervision of said health officer.

In the event of the Board of Education having passed a regulation requiring vaccination of all teachers and pupils, the school may be opened after the above disinfection and cleansing; otherwise the school shall be kept closed until the local board of health, with the approval of the State Board of Health, directs otherwise.

75. No principal, superintendent or teacher of any school, and no parent, master or guardian of any child or minor, having the power and authority to prevent, shall permit any such child or minor having small-pox, scarlet fever, diphtheria, measles, chicken-pox, tuberculosis, influenza, tonsilitis, erysipelas, whooping cough, mumps, itch, ringworm or trachoma, or any other dangerous communicable disease, or any child residing in any house in which any such disease exists or has recently existed, to attend any public, private, parochial, church or Sunday school until the local health officer of the city, village or township shall have given his permission for such attendance.

76. A school house wherein a child suffering from scarlet fever or diphtheria has been present shall be deemed infected and must be temporarily closed and thoroughly disinfected and cleaned under the supervision of the local health officer before the re-opening of the school. Such disinfection and cleaning shall be done according to the direction of the Minnesota State Board of Health in its circular on disinfection.

77. All school houses shall be inspected from time to time by the local health officer, and if found to be in an unclean or unsanitary condition, said health officer shall forthwith order that the place be closed and kept closed until it has been properly cleaned or disinfected, or both, as the case may require.

78. The local board of health of every city and village shall cause every child in the public schools to be separately and carefully tested and examined at least once in every school year in order to ascertain whether he or she is suffering from defective sight or hearing, or from any other disability tending to prevent his or her receiving the full benefit of the school work, or requiring

a modification of the school work in order to prevent injury to the child or to secure the best educational results for such child. Tests of sight and hearing shall be made by teachers and reported to the Minnesota State Board of Health by the head of the school. The head of the school shall cause notice of any defect or disability in any child requiring treatment to be sent to the parent or guardian of the child.

79. The Minnesota State Board of Health shall prescribe and furnish to the superintendents of schools suitable rules of instructions, test cards, blanks, records and other appliances for carrying out the above regulations. The several Normal Boards of the state shall provide for pupils in the Normal Schools the instruction and practice prescribed by the State Board of Health for testing the sight and hearing of school children.

New Jersey

Chapter 92, P. L. 1909—Relating to Medical Inspection

[Approved April 13, 1909]

229. Every board of education shall employ a competent physician to be known as the medical inspector and fix his salary and term of office. Every board of education shall adopt rules for the government of the medical inspector, which rules shall be submitted to the State Board of Education for approval.

The medical inspector shall examine every pupil to learn whether any physical defect exists, and keep a record from year to year of the growth and development of such pupil, which record shall be the property of the board of education, and shall be delivered by said medical inspector to his successor in office. Said inspector shall lecture before the teachers at such times as may be designated by the board of education, instructing them concerning the methods employed to detect the first signs of communicable disease and the recognized measures for the promotion of health and the prevention of disease. The board of education may appoint more than one medical inspector. A board of education may exclude from school any child whose presence in the school-room shall be certified by the medical inspector as detrimental to the health or cleanliness of the pupils

in the school, and shall notify the parent, guardian or other person having control of such child of the reason therefor. If the cause for exclusion is such that it can be remedied, and the parent, guardian or other person having control of the child excluded as aforesaid shall fail or neglect within a reasonable time to have the cause for such exclusion removed, such parent, guardian or other person shall be proceeded against, and, upon conviction, be punishable as a disorderly person.

This act shall take effect immediately.

New York

CHAPTER 602.—AN ACT TO AMEND THE EDUCATION LAW, in RELATION TO THE POWERS AND DUTIES OF BOARDS OF EDUCATION

Became a law June 23, 1910

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

SECTION 1. Section three hundred and ten of chapter twenty-one of the laws of nineteen hundred and nine, entitled "An act relating to education, constituting chapter sixteen of the consolidated laws," as amended by chapter one hundred and forty of the laws of nineteen hundred and ten, is hereby amended by adding thereto a new subdivision, to be known as subdivision twenty-one, and to read as follows:

21. To provide for the medical inspection of all children in attendance upon schools under their supervision whenever in their judgment such inspection shall be necessary and to pay any expense incurred therefor out of funds authorized by the voters of the district or city or which may properly be set aside for such purpose by the common council or the board of estimate and apportionment of a city.

SEC. 2. This act shall take effect immediately.

North Dakota

[Enacted 1911]

SECTION 238. MEDICAL INSPECTION OF SCHOOLS. The board of any school corporation may employ one or more physicians as medical inspector of schools. It shall be the duty of the medical inspector to examine, at least once annually, all children enrolled in the public schools of the district, except those who present a certificate of health from a licensed physician, and to make out suitable records for each child, one copy of which shall be filed with the county or city superintendent of schools. Notice of physical defects of abnormal or diseased children shall be sent to the parents, with recommendations for the parent's guidance in conserving the child's health. The medical inspector shall co-operate with state, county and township boards of health in dealing with contagious and infectious diseases and to secure medical treatment for indigent children. It shall be the duty of the county and city superintendents of schools to co-operate with school boards in promoting medical inspection. He may arrange schools by groups, especially in the rural districts, for purposes of inspection, and shall advise school boards with a view to securing the most efficient and economical administrations of this law. The school board or board of education shall furnish all blanks and other needed supplies for this purpose.

Ohio

[Enacted 1910]

Medical inspection.

SECTION 7692. Any board of education in a city school district may provide for the medical inspection of pupils attending the public schools. For that purpose it can employ competent physicians, nurses, and provide for and pay all expenses incident thereto from the public school funds, or by agreement with the board of health or other board or officer performing the functions of a board of health for such city. It may provide for medical and sanitary supervision and inspection of the schools which are under the control of such board of education and of the pupils

attending such schools, by a competent physician selected by the parent or guardian of the child, but on failure of the parent or guardian, then by the district physicians and other employes to be appointed by such board of health. (R. S. Sec. 4018a.)

Compensation

SEC. 7693. A board of education in a city school district making such agreement may provide and pay compensation to the employes of the board of health in addition to that provided by the city. (R. S. Sec. 4018a.)

Pennsylvania

SCHOOL CODE

ARTICLE XV

MEDICAL INSPECTION AND HYGIENE

[Enacted 1911]

SECTION 1501. Every school district of the first second or third class in this Commonwealth shall annually provide medical inspection of all the pupils of its public schools by proper medical inspectors to be appointed by the board of school directors of the district. Such medical inspection shall be made in the presence of the parent or guardian of the pupil when so requested by parent or guardian. All such medical inspectors shall be physicians legally qualified to practice medicine in this Commonwealth who have had at least two years' experience in the practice of their profession and shall be paid such amounts as the boards of school directors may determine. Provided that nothing in this act shall preclude the appointment of health officers of municipalities as medical inspectors in the school districts of this Commonwealth. *Provided further that if in any year before the first day of August the board of school directors of any school district of the third class shall decide by a majority vote of the members thereof not to have medical inspection in any or all of the schools of such district such medical inspection shall not be made in such schools during the following school year.*

SEC. 1502. In school districts of the first class wherein the Department or Board of Health therein is providing the medical

inspection for the public schools as required by this act said Department or Board of Health may if it so elects continue to provide such medical inspection and appoint *such number of inspectors therefor with such salaries as shall be satisfactory to the board of school directors of the district* and the medical inspection so provided shall be deemed a compliance with this act and shall be paid for by the school district.

SEC. 1503. In every school district of the fourth class in this Commonwealth the State Department of Health shall provide in such manner as it may determine medical inspection for all the pupils in the public schools by proper medical inspectors to be appointed by the State Commissioner of Health at the expense of said Department. All such medical inspectors shall be legally qualified physicians who have had not less than two years' experience in the practice of their profession. *Such medical inspection shall be made in the presence of the parent or guardian of the pupil when so requested by parent or guardian. Provided that if the board of school directors of any school district of the fourth class shall decide by a majority vote of the members thereof not to have medical inspection of the pupils in a part or all of the schools of such district and the Commissioner of Health is officially notified thereof in writing before the first day of July such medical inspection shall not be made in such schools during the following school year.*

SEC. 1504. If in any school district *which is required by this act to provide medical inspection for its public schools such medical inspection as is herein required* is not furnished within thirty days after the beginning of the school year the Commissioner of Health shall after two weeks' written notice to the board of school directors of such district appoint a properly qualified medical inspector or inspectors for the district for the remainder of the school year and shall fix the compensation for the same which shall be paid by the district.

SEC. 1505. The medical inspectors shall at least once each year inspect and carefully test and examine all pupils in the public schools of their districts giving special attention to defective sight hearing or other disabilities and defects specified by the Commissioner of Health in his directions for the medical examinations of schools. Each medical inspector shall make to the teacher or if the board of school directors so directs to the principal or district superintendent of schools a written report con-

cerning all pupils found to need medical or surgical attention and giving careful directions concerning the care of each pupil who needs special care while in school. The teacher or the principal or district superintendent shall keep such report until the end of the school year shall carry out as carefully as possible said directions concerning the special care of pupils while in school and shall promptly send a copy of the medical inspector's report upon each child to the parents or guardian thereof.

SEC. 1506. The medical inspector shall at least once each year and as early in the school term as possible make a careful examination of all privies water closets urinals cellars the water supply and drinking vessels and utensils and shall make such additional examinations of the sanitary conditions of the school buildings and grounds as he deems necessary or as the regulations of the State Department of Health or the rules of the board of school directors or of the local board of health require. He shall see that the laws of the Commonwealth relating to the health and sanitation of the public schools and the requirements of the local board of health are complied with.

SEC. 1507. He shall promptly make such reports to the Commissioner of Health as are required by him or by the regulations of his department and such reports to the local boards of school directors as he deems necessary or as are required by the Commissioner of Health or by the board of school directors. He shall perform such other duties as may be required by the health and sanitation laws of this Commonwealth or by the board of school directors.

SEC. 1508. Any board of school directors may employ one or more school nurses who shall be graduates of reputable training schools for nurses and shall define their duties.

SEC. 1509. No person having tuberculosis of the lungs shall be a pupil teacher janitor or other employee in any public school unless it be a special school carried on under the regulations made for such schools by the Commissioner of Health.

SEC. 1510. Any pupil prevented from attending school on account of the health or sanitation laws of this Commonwealth or by the sanitary regulations of the local board of health or the board of school directors is hereby relieved from complying with the provisions of this Act concerning compulsory attendance during such time as he is thereby prevented from attending school.

Utah

Chapter 140.—An Act Requiring the Examination of All School Children to Ascertain if They have Defective Sight or Hearing, or Diseased Teeth, or if They are Addicted to Mouth Breathing

[Approved March 20, 1911]

Be it enacted by the Legislature of the State of Utah:

Section 1. It shall be the duty of every teacher engaged in teaching in the public schools of the State, separately and carefully, to test and examine every child under his jurisdiction to ascertain if such child is suffering from defective sight or hearing, or diseased teeth, or breathes through its mouth. If such test determines that any child has such defect it shall be the duty of the teacher to notify, in writing, the parent of the child of such defect and explain to such parent the necessity of medical attendance for such child.

Sec. 2. The State Board of Health shall prescribe rules for making such tests, and shall furnish to Boards of Education and Boards of Trustees of school districts, rules of instruction, test cards, blanks and other useful appliances for carrying out the purposes of this Act.

Sec. 3. During the first month of each school year, after the opening of school, teachers must make the tests required by this Act upon the children then in attendance at school; and thereafter, as children enter school during the year, such tests must be made immediately upon their entrance.

Sec. 4. It shall be the duty of the Boards of Education and Boards of Trustees of the several school districts of the State to enforce the provisions of this Act.

Sec. 5. The Board of Education or Board of Trustees of any school district may employ regularly licensed physicians to make the tests required by Section 1 of this Act, and when such tests are made by a physician, the teachers shall not be required to make the tests provided for in Section 1 of this Act.

Vermont

[Approved November 11, 1910]

NUMBER 73.—AN ACT TO PROVIDE FOR THE MEDICAL INSPECTION OF PUBLIC AND PRIVATE SCHOOLS

It is hereby enacted by the General Assembly of the State of Vermont:

SECTION 1. The school directors of any town or city, or the school committee of any incorporated district, may appoint one or more medical inspectors for their schools, provided the legal voters of such town, city, or incorporated district at their annual school meeting by vote instruct said directors or committee so to do. The compensation of such inspectors shall be fixed by the school directors or prudential committee.

SEC. 2. Such medical inspectors shall examine the pupils of said schools, and in all things comply with such rules and regulations as may be promulgated by the state board of health relating thereto.

SEC. 3. Said inspectors shall, under the same regulations, examine the pupils of any private school when requested so to do by the principal thereof, or whenever any communicable disease is present in any town or city in which such private school may be located, or when the pupils thereof may have been exposed to any communicable disease.

SEC. 4. This act shall take effect September 1, 1911.

Virginia

[Enacted 1910]

"The school boards of the cities and counties may, in their discretion, select and appoint medical inspectors of school children whose duties and compensation shall be prescribed by the respective boards, and who shall report to and be under the control of said boards."

Washington

CODE OF PUBLIC INSTRUCTION. CHAPTER 97, SESSION LAWS OF 1909.—PARAGRAPH 191, APPLYING TO DISTRICTS OF THE FIRST CLASS

Fourteenth. To appoint a practising physician, resident of the school district, who shall be known as the School District Medical Inspector, and whose duty it shall be to decide for the board of directors all questions of sanitation and health affecting the safety and welfare of the public schools of the district; he or authorized deputies shall make monthly inspections of each school in the district and report the condition of the same to the Board of Education and Board of Health.

West Virginia

[Enacted February, 1911]

AN ACT TO ESTABLISH MEDICAL INSPECTION IN PUBLIC SCHOOLS

Be it enacted by the Legislature of West Virginia:

That the board of education of each independent school district in this state shall and other boards of education may within ninety days from the passage hereof and thereafter on the first day of January of each year, appoint one or more legally qualified practising physicians in said school district to be known as medical inspector of schools, fix their salaries and define their duties as hereinafter provided, and furnish the necessary stationery and printing for records and reports.

It shall be the duty of the medical inspector of schools to separately and carefully test each pupil in his school once during each school year to ascertain if the pupil is suffering from any defect or disability that would prevent the pupil receiving the full benefit of the school work or if some modification of the school work should be made that the pupil might receive the best educational results.

The medical inspector also shall, at the request of the superintendent of the school, carefully examine any pupil for evidence

of infectious or contagious disease or any other condition which might prove harmful to other pupils. Whenever any pupil shows symptoms of smallpox, chickenpox, measles, scarlet fever, tuberculosis, diphtheria, influenza, whooping cough, tonsilitis, mumps, scabies, syphilis and other venereal diseases, trachoma or any other contagious disease, the pupil must be sent home and the boards of health and education notified in writing by the medical inspector of schools. Any pupil with any of the said diseases cannot attend school.

The medical inspector of schools also shall carefully examine each pupil who has been absent from school for five consecutive days for contagious or infectious disease, unless the pupil shall present to the superintendent of the school a written or printed statement in the form hereinafter given, showing that the pupil and the house from which the pupil comes is free from infectious or contagious disease, signed by the attending physician and endorsed by the medical inspector of schools.

The medical inspector of schools also shall, when requested by the board of education, conduct investigations, furnish information and advice and assist to formulate rules of procedure on matters pertaining to the lighting, heating, ventilating and sanitation of the school buildings; the hours of study, recesses, exercises and any other matter pertaining to the health, vitality and development of the pupils. And, if deemed necessary, the board of education may employ a teacher nurse to investigate the sanitary conditions of the pupil and home.

The medical inspector also shall keep an accurate and complete record of each pupil tested and examined in the following form:

Date....., 191..
Pupil.....Age.....
Grade.....School.....
Parent or guardian.....
Heart.....
Lungs.....
Eyes.....
Ears.....
Throat.....
Teeth.....
Contagious or Infectious Disease.....

Skin Disease.....
Special Note.....
.....
Recommendation.....
Signed....., M.D.
Medical Inspector of.....School.

And, when any condition is found which, in the opinion of the medical inspector would prevent the pupil receiving the full benefit of the school work or would be a symptom of infectious or contagious disease, the medical inspector shall notify the parent or guardian and the superintendent of the school attended, using the following form:

....., 191..
The parent or guardian of.....
attending.....School
is hereby notified that examination of this pupil shows abnormal condition of.....
.....
Take the pupil to your family physician for treatment and advice and take this card with you.
....., M.D.
Medical Inspector.....School.

and on the reverse side shall be printed

I have this day examined.....
of the.....Grade.....School
and find the following condition.....
.....
and have advised as follows.....
.....
Signed....., M.D.
Dated..... Physician.

The physician signing will return card to the pupil who will return it to the superintendent of the school attended.
And, when any pupil shall have been absent from school for

five consecutive days, statement must be made to the superintendent of the school attended in the following form:

Date....., 191..
I have this day examined.....
of the.....School
and find this pupil and the house from which the pupil comes to be free from infectious or contagious disease.
Signed....., M.D.
Approved:....., M.D.
Medical Inspector.....School.

Some Publications of the Department of Child Hygiene, Russell Sage Foundation

400 Metropolitan Tower, New York City

Medical Inspection

No. 54. The Argument for Medical Inspection and Some Significant Facts

Hygiene and Health

No. 71. Open Air Schools. Leonard P. Ayres, Ph.D.

No. 101. What American Cities are Doing for the Health of School Children. (Price 15 cents.) (A Report Summarizing Conditions in 1038 cities.)

Medical Inspection of Schools.—Luther H. Gulick, M.D., and Leonard P. Ayres, Ph.D. 276 pages. Price, postpaid, $1.00. Charities Publication Committee, 105 East 22d Street, New York City.

Gives in convenient form information about the historical, educational, administrative, and legal phases of the work. The most extensive bibliography on the subject yet compiled is added. This book has run into three editions.

Open Air Schools.—Leonard P. Ayres, Ph.D. 171 pages. Price $1.20 (postage 12 cents). Doubleday, Page & Co., New York.

This volume gives the important and significant American and foreign material with respect to outdoor schools. It describes the English, German and American types, gives the results and furnishes definite information with respect to clothing, food, cost, administration, etc. It has more than 70 pages of illustrations and diagrams. Bibliography.

A leaflet giving full list of printed matter will be mailed on request.

LIBRARY OF CONGRESS
0 020 313 740 0